THE NATIONAL ARCHIVES

CERT. NO. S. C. 16630

PENSIONER: Joseph L. Richardson

OF

VETERAN:

CAN NO: 127

BUNDLE NO: 53

MR

Write nothing above this line.

(3–060.) 1st Culd.

Middle Div.
Estill Ex'r.
Widows No. 644696
Joseph L Richardson
Co D 13th Mich Vol Inf
Search to Richardson under

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Jany 8, 1897

SIR:

It is alleged that Joseph L Richardson enlisted November 9, 1861
and served as a Private in Co. D, 13th Reg't Mich Vol Inf
also as a — in Co. —, — Reg't —

RECORD & PENSION OFFICE JAN 8 1897

and was discharged at Nashville Tenn., Dec 4, 1864

It is also alleged that while on duty at Nashville Tenn
on or about March 1st 1862, he was disabled by typhoid fever.
Chronic diarrhoea

and was treated in hospitals of which the names, locations, and dates of treatment are as follows:
Represented hospitals & hospitals at Nashville Tenn
Names or numbers unknown

In case of the above-named soldier the War Department is requested to furnish an official statement of the enrollment, discharge, and record of service so far as the same may be applicable to the foregoing allegation, together with full medical history. Please give the rank he held at the time he is claimed to have incurred the disability alleged, and if records show that he was not in line of duty during that period, let the fact be stated.

Very respectfully,

D. T. Murphy
Commissioner.

The Officer in Charge of the
Record and Pension Division,
War Department.

o 2

5617 b—75 m

(3–060.)

No. 644696

WAR DEPARTMENT,

RECORD AND PENSION DIVISION.

Respectfully returned to the Commissioner of Pensions.

Joseph L. Richardson

Co. D 13, Reg't Mich. Inf.

was enrolled Nov. 9, 1861

and Disch. on S.C. of D. Dec. 4, 1862

From Enr, 186, to Disch, 186

he held the rank of Pvt.

and during that period the rolls show him present except as follows: Apl 30/62 Left sick at Nashville Tenn. absent — June 30/62 same also: Mar 28/62 — Aug 31/62 Left sick on the line of march, whereabouts unknown — Oct 31/62 Absent without leave. left back on line of march, whereabouts unknown

"Admitted D. No. 7 G. H. Nashville Tenn. March 29/62 with continued fever & costiveness & transferred May 26/62. Entered No. 8 G. H. Nashville Tenn. May 27/62 with debility & transferred June 21/62. was examined by a Medical Board at Conv. Camp Hosp. Nashville Tenn. Oct-/62 disability not stated, & sent to G. H. date not shown; again examined as above about Nov. 10/62. disability Chronic Diar-

~~The medical records show him treated as follows~~ shoca 7 Months and discharged Dec. 4/62 at Nashville Tenn. on Surgeons Certificate of Disability"

The medical records show him treated as above, Nothing additional found

Write nothing to the left of this line.

PENSION OFFICE U. S. JAN 11 1897

By authority of the Secretary of War:

P. Hartsuff

Colonel Major and Surgeon, U. S. Army.

Per M.

JAN 9 1897

Date

(COMMISSIONER OF PENSIONS.)

t621, G. L.,

[3—405.]

(PENSIONER DROPPED.)

U. S. Army & Navy Survivors' Ex.
JUN 2 1897
DIVISION R.

U. S. Pension Agency,

Detroit, Mich,

May 27, 1897.

Hon. H. Clay Evans,
Commissioner of Pensions.

Sir. FILL

I hereby report that the name of Joseph L. Richardson,
Pvt. D. 13th Mich, who was a pensioner on the rolls
of this Agency, under Certificate No. 16 630, and who was last paid
at $12.00, to Sept. 4th, 1896, has been dropped
because of death, Nov 30th 1896.

Cert. Wid. 644696

Very respectfully,

O. A. James
Pension Agent.

Every name dropped to be thus reported at once.

(11867—100,000.) 6—163

Finance Division
JUN 1 1897
BUREAU OF PENSIONS.

P P

Declaration of Pensioner for Restoration to the Rolls who has been dropped upon a biennial or other Medical Examination.

STATE OF Illinois, COUNTY OF Will, ss:

On this 15th day of October, A. D. one thousand eight hundred and seventy- Seven personally appeared before me Walter B Hawley Clerk of the County Court Joseph L Richardson the same being a court of record within and for the county and State aforesaid, aged Sixty three years, who being duly sworn according to law, makes the following declaration: That he is the identical Joseph L Richardson who was pensioned on the rolls of the agency at Detroit Michigan, and whose pension certificate, No. 16,630, is herewith returned; that he was last paid at said agency to the 4th day of September, 1863, at the rate of Two dollars per month; that at the biennial examination due September 4, 187, he was dropped from the rolls. Believing that the disability for which he was pensioned, to-wit: [1] Chronic Diarrhea still continues in a pensionable degree, he asks that his name be restored to the pension rolls. That his medical examinations since he became a pensioner have been as follows: [2] I have not been examined since the year 1863, but the exact date cannot be stated, but I was last examined in Niagara County State of New York but the name of the place or name of Surgeon I have forgotten —

and that he has not re-enlisted or been paid in the military, naval, or marine service of the United States since the last payment of his pension; tha he hereby appoints _____ attorney to prosecute the above claim; that his residence is at No. 47, in Iowa Avenue ~~street~~, in the City of Joliet, county of Will, State of Illinois, and that his post office address is Joliet Will County Illinois

(Attest.)

Albert J. Granger
D. J. Hays

Joseph L. Richardson
(Claimant's signature.)

Also personally appeared George Munroe, residing at No. 284, in Joliet street, in Joliet, and John Green, residing at No. 9, in 2nd Avenue ~~street~~, in Joliet, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw Joseph L Richardson, the claimant, sign his name (make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

George Munroe
John Green
(Signatures of witnesses)

SWORN to and subscribed before me this 15th day of October, A. D. 187 7.

and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing, including the words _____, erased, and the words _____, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

Walter B Hawley
(Signature.)
Clerk County Court
Will County Illinois
[Official character.]

1 Here state specifically the disability, or disabilities, for which pension is claimed.
2 Here insert the names of the surgeons by whom he has been examined, with the month and year in which examination was made.

P

P

FOR RESTORATION

OF A

PENSIONER

Dropped upon a Biennial or other Medical Examination.

....., Applicant.

No. of Pension Certificate .....

FILED BY

All the blanks in this form should be carefully filled and the requirements of the notes strictly observed.

An honorable discharge from the service in all cases is necessary.

Declarations of claimants, either for original pension or for increase of pension already granted, must be made before a court of record, or before some officer thereof having custody of its seal; said officer being fully authorized and empowered to administer and certify any oath or affirmation relating to any pension or application therefor.

The claimant's identity and loyalty must be proven by two witnesses, certified by the judicial officer to be respectable and credible, who are present and witness the signature of the declarant, and certify to his identity and loyalty under oath or affirmation.

Declarations and other papers should be as legible and as clear in statement as possible.

Where any evidence is already on file in any department of the Government, a definite description of and specific reference to it will render it available in any subsequent claim.

The post office address (naming street and number in all large cities) of the applicant, attorney, and witnesses, should be embodied in or accompany every application, and all evidence in each claim; and each change of residence of said parties, while communicating with the Pension Office or the pension agents, should be stated.

The fees for the prosecution of claims for pensions will not be allowed to exceed twenty-five dollars; no part of which is payable before the certificate for the pension has been issued.

Pensions are, by law, exempted from any liability on account of the obligations of the pensioners, and no lien upon them can be recognized.

All facts, testimony of which is required to establish a claim, must be proven by the affidavits of two or more credible witnesses, unless other evidence is specified.

The statements of claimants, unless duly corroborated, are not accepted as evidence.

Testimony, in support of allegations made in a declaration, may be taken before any officer whose authority and signature are duly certified, and who shall disclaim any interest, direct or indirect, in the prosecution of the claim.

Persons desiring to complete claims pending at the decease of the claimants, must furnish a duly verified certificate of their authority as heirs or legal representatives.

With all claims for arrears, increase, or restoration to the rolls, the original pension certificate must be returned, or explanation of its absence must be given under oath.

To facilitate the adjudication of claims, all the requisite evidence that is available should be forwarded with the application.

DEPARTMENT OF THE INTERIOR
OCT 18 1877
PENSION OFFICE.

DECLARATION FOR INVALID PENSION.

STATE OF Michigan }
COUNTY OF Genesee } ss.

On this Nineteenth day of February 1863, before me, the undersigned, a County Judge, in and for the County and State above named, and by law duly authorized to administer oaths for general purposes, personally appeared Joseph L. Richardson who, being duly sworn according to law, declares that he is aged Forty Eight years years, and is a resident of Hazelton Shiawassee County, in the State of Michigan and that he is the identical Joseph L. Richardson who was a Private in Company "D" commanded by Captain Lorin Chadwick in the 13th Regiment Mich Infantry Volunteers, commanded by Colonel Shoemaker; in the war of 1861 and 1862, for the suppression of the Rebellion, in certain States of the Union, and for the maintenance of the Federal Government. That he volunteered as above stated at Hazelton, Shiawassee County, in the State of Michigan on or about the Ninth day of November, 1861, for the term of Three years, and was honorably discharged at Nashville, Tenn. on the Fourth day of December, 1862, as will appear by his certificate of discharge herewith presented.

That while in said service and in the line of his duty at Nashville in the State of Tennessee, on the Twenty Eighth day of March 1862* he was attacked with Typhoid fever, and on that account was sent to hospital. That after his fever left him he was affected with Chronic Diarrhea which he still has, and was so generally debilitated as to be kept in hospital and Convalescent barracks from the time he entered as aforesaid until discharged on Surgeons certificate of Disability" as aforesaid, and that he still remains so debilitated as to be entirely unable to do manual labor.

That since leaving said service this applicant has resided at Hazelton aforesaid and his occupation has been doing nothing because unable to work.

He makes this declaration for the purpose of being placed on the Invalid Pension Roll of the United States, by reason of the disability above stated; and hereby constitutes and appoints H. R. Lovell his Attorney to prosecute this claim, procure a Pension Certificate, and semi-annually to receive and receipt for his Pension from the Pension Agent.

Joseph L. Richardson

Sworn to, subscribed and acknowledged before me, the day and year first above named, and on the same day personally appeared James D. Haight a resident of the City of Flint Genesee Co Mich and Almon R. Sherwood a resident of Mundy, Genesee Co. in the State of Michigan and made oath that they are personally acquainted with Joseph L. Richardson who has made and subscribed the foregoing declaration in their presence, and that they have every reason to believe, from the appearance of the applicant, and their acquaintance with him, that he is the identical person he represents himself to be, that they reside as above stated, and are disinterested in this claim for a Pension.

That since leaving the service of the United States as aforesaid, his habits have been uniformly good, and his occupation has been that he is unable to work and all his averments are true, according to their best knowledge and belief.

James D. Haight

Almon R Sherwood

Sworn to and subscribed before me; and I certify that I am not interested in this claim or concerned in its prosecution; that I believe the affiants to be respectable and credible witnesses, and that the claimant is the person he represents himself to be.

Samuel B. Wicks *County Judge.*

* Here give a full description of the disability by reason of which a Pension is claimed, stating when, where and how the wounds were received, or the disease contracted.

State of Michigan
County of Ingham } ss.

I George R Gould Clerk of the County Court, in and for the County and State above named, do hereby certify that Samuel B Wicks Esq., before whom the foregoing declaration and affidavit were made, and who has thereunto signed his name, was, at the time of so doing, the County Judge in and for the said County and State above named, duly commissioned and sworn, that all his official acts are entitled to full faith and credit, and that his signature thereto is genuine.

In Testimony Whereof, I have hereunto signed my name and affixed the official seal of said County Court, this 19th day of February, 1863.

George R Gould Clerk.

Forwarded by H. R. Lovell, of Flint, Michigan

Applicant's Post-Office Address { Claim Agent

Hazelton
Shiawassee Co.
Michigan.

INVALID PENSION CLAIM.

DECLARATION.

Act of July 14 A.D. 1862

Joseph L. Richardson

Co. G 13th Regt

Mich Infantry Vols.

Printed and for Sale by Tribune Co., 51 Clark Street, Chicago.

NOTE.

☞ Three official papers, viz: THE DISCHARGE FROM SERVICE, THE CERTIFICATE OF THE COMMISSIONED OFFICER UNDER WHOM THE CLAIMANT SERVED, AND THE SURGEON'S CERTIFICATE must be forwarded with this Declaration.

Correspondents sending Claims unaccompanied by a letter, will insert their names in the blank left for that purpose be'ow the Clerk's Certificate.

Apr 21 1863

ACT OF JUNE 27, 1890.
DECLARATION FOR WIDOW'S PENSION.

To be executed before a Court of Record or some officer thereof having custody of its seal, a Notary Public or Justice of the Peace whose official signature shall be verified by his official seal, and in case he has none, his signature and official character shall be certified by a Clerk of a Court of Record, or a City or County Clerk.

State of Illinois, County of Will, ss;

On this 4 day of December, A. D., one thousand eight hundred and ninety-six, personally appeared before me, a ..... (Notary, Justice, or Clerk of Court.) within and for the County and State aforesaid, Sarah E. Richardson (Insert name of applicant.), aged 57 years, a resident of Joliet (Name of town or city.), County of Will, State of Illinois, who, being duly sworn according to law, declares that she is the widow of Joseph L Richardson (Name of Soldier.), who enlisted under the name of Joseph L Richardson (Name under which soldier enlisted.), on the 9th day of November A. D. 1861, as a Private (Here state rank.) in Company D (Letter of Company.), in the 13 (No. of Regiment.) Regiment of Michigan (Name of State, and whether Infantry, Cavalry, or Artillery.) Volunteers, and served at least ninety days in the late War of the Rebellion, in the service of the United States, who was HONORABLY DISCHARGED Dec. 4th (Date of Discharge.) 1862, and died Aug. 30th 1896 (Date of death; cause need not be stated.). That he was not employed in the military or naval service otherwise than as stated above (Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.)

That he was never employed in the military or naval service of the United States after the 4th day of December (Date of soldier's last discharge.), 1862. That she was married under the name of Sarah E Fitts to said Joseph L Richardson (Name of Soldier.), on the 11th day of June A. D. 1867, by a Justice of the Peace at Johnson's Creek, Niagara Co. N.Y., there being no legal barrier to such marriage; that she had not been previously married; that her said husband had ~~not~~ been previously married. (4) to Diana Bowen who died March 22, 1865 (If either had been previously married, so state, and give date of death or divorce of former spouse.)

That she has not remarried since the death of the said Joseph L. Richardson (Name of soldier or sailor.)

That she is without other means of support than her daily labor. That the names and dates of birth of all the children of the soldier, now living, and under sixteen years of age, are as follows:

....., born....., 18..... ....., born....., 18.....

....., born....., 18..... ....., born....., 18.....

....., born....., 18..... ....., born....., 18.....

That she has not abandoned the support of any one of her children, but that they are still under her care or maintenance. That no (A or no.) prior application for pension has been filed by herself, ~~or~~ the soldier was drawing a pension on Ctf. 16,620 (If prior application has been filed, either by soldier or widow, so state, giving number assigned to it.)

That she makes this declaration for the purpose of being placed on the pension roll of the United States under the provisions of the Act of June 27, 1890. She hereby appoints, with full power of substitution and revocation, Francis A Hoover of Joliet, Illinois her true and lawful attorney to prosecute her claim, the fee to be TEN DOLLARS, payable as prescribed by law.

That her post-office address is 610 Clinton St. Joliet (Name of post-office.), county of Will, State of Illinois.

ATTEST:

1 .....

Sarah E Richardson (Claimant's signature—FULL name.)

2 .....
(Two witnesses who write, sign here.)

ATTY FILED

Also personally appeared Moses H Gardner, residing at
(Name of one witness.)
Juliet, Illinois, and ~~Gustave R Carey~~ Chas A Hill, residing at
(Name of other witness.)
Joliet, Illinois, persons whom I certify to be respectable and entitled to credit,
and who, being by me duly sworn, say they were present and saw Sarah E Richardson
(Name of widow.)
claimant, sign her name (or make her mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and an acquaintance with her of 25 years and
10 years, respectively, that she is the identical person she represents herself to be; and that they have no interest in the prosecution of this claim.

ATTEST:

1 Moses H. Gardner

2 Charles A Hill
(Signatures of witnesses—FULL names.)

Sworn to and subscribed before me this Fourth day of December, A. D. 1896, and I hereby certify that the contents of the foregoing declaration and affidavit were fully made known and explained to the applicant and witnesses before swearing, including the words
erased, and the words
(Insert any words erased.)
added, and
(Insert any words added.)
that I have no interest, direct or indirect, in the prosecution of this claim.

John B Feehan
(Signature.)

Notary Public
(Official Character.)

[L. S.]

My Commission Expires April 26. 1900

NOTE.—If claimant or identifying witnesses sign by mark (X) such signature must be *attested* by *two* persons *who can write*, of whom the magistrate may be one.

The Act of June 27, 1890, requires in case of a widow:

1. That the soldier served at least NINETY DAYS in the War of the Rebellion and was HONORABLY DISCHARGED.
2. Proof of soldier's death (death cause need not have been due to Army service).
3. That widow is "without other means of support than her daily labor."
4. That widow was married to soldier prior to June 27, 1890, date of the Act.
5. That all pensions under this act commence from date of receipt of application in Pension Bureau.

Inv. 16,630.

ACT OF JUNE 27, 1890.

WIDOW'S CLAIM.

Claimant. Sarah E Richardson

Soldier. Joseph L Richardson

Service. Co D, 13th Ind. Cav. Vol.

Address. 610 Clinton St. Joliet, Ill.

(with Soldier's Cert. 16,630.)

FILED BY

Frances A Hower

Joliet, Ill.

DEC 11 1896

RECEIVED

Date of Execution Dec 4 1896

LAW DIV. RECEIVED DEC 9 1896

Printed and for sale by J. F. Sherry, Claim Blank Printer, 623 D Street, Washington, D. C.

Apr 8 Murray
Surgeon 20th Mich Vol.

ARMY OF THE UNITED STATES.

CERTIFICATE OF DISABILITY FOR DISCHARGE.

(To be used in duplicate, in all cases of discharge on account of disability.)

Joseph L Richardson a private of Captain Chadwicks Company, (D) of the 13th Regiment of United States Mich Vols was enlisted by Capt Chadwick of the Regiment of at Hazleton on the 9th day of November 186 1, to serve 3 years; he was born in Gorman in the State of New York is 48 years of age, 5 feet 5 inches high, Light complexion, Blue eyes, Brown hair, and by occupation when enlisted a Blacksmith During the last two months said soldier has been unfit for duty days. (*Here consult directions on Form 12, p. 269, Medical Dept. Gen. Reg.*)

STATION: Nashville, Tenn
DATE: November 13th, 1862.

Commanding Company.

I CERTIFY, that I have carefully examined the said Joseph L. Richardson of Captain Chadwicks Company, and find him incapable of performing the duties of a soldier because of (*Here consult par. 1134 p. 245 and directions on Form 12 p. 269 Med. Dept. Gen. Reg.*)

Chronic Diarrhea

Seven months

I W Wade Asst Surgeon. USA

DISCHARGED, this 4th day of Dec 186 2, at Nashville Tenn

Lt Col 9th Reg Commanding the Post.

NOTE 1.—When a *probable* case for *pension, special care* must be taken to state the *degree* of disability.

Note 2.—The *place* where the *soldier* desires to be *addressed* may be here added.

Town— *County*— *State*—

(DUPLICATES.)

CERTIFICATE OF DISABILITY FOR DISCHARGE

IN THE CASE OF

Joseph L. Richardson

a Private Co. "I"

13th Reg't of Mich

Hd Qrs 14 army Corps
Nashville Tenn
Nov 28 1862
Soldier discharged
By order

[signature]

Lt 1 Mich Vol & A A A G
Dep Jud Adv Office
A. G. Office
Mch 10/63
[signature]
A. A. Gen

Received (A. G.) Office, _____, 186

DEPARTMENT OF THE INTERIOR
Mar 18 1868
PENSION OFFICE

State of Illinois }
Will County } ss Joseph L. Richardson of said County being first duly sworn on oath says that he is the identical person named in Claim No. 16.630 for Restoration to Pension Rolls and now on file at the Pension Office. Washington D. C.

Affiant further saith that he has not been in the military or naval service since December 4th 1862. And further saith not.

Joseph L. Richardson (S)

Subscribed and sworn to before me this 19th day of August A.D. 1880 and I have no interest direct or indirect in the prosecution of this claim.

W. H. Farley,
Clerk County Court Will Co Ill

No. PENSION

U.S. PENSION SEP 1 1880 BUREAU

Joseph L. Richardson

Late Pt Co D 13th Regt

Michigan Vol. Inf

affd of

Claimant

No substance

Filed By

Geo. J. Munroe.

Atty

Joliet

Illinois

State of Illinois
Will County } On this 16th day of June a.d. 1880 personally appeared before me Clerk of the County Court, the same being a Court of Record within and for the County and State aforesaid Joseph L. Richardson aged 66. years. who being duly sworn according to law. makes the following declaration asking to be restored to the pension rolls: That I am the identical Joseph L. Richardson who was pensioned on the rolls of the Agency at Detroit Michigan and whose Pension Certificate No. 16.630 is herewith returned: that I was last paid at said agency to the 4th day of March 1867. according to the best of his knowledge: that I have since resided as follows; in the City of Joliet in the County of Will, and State of Illinois: that I have not claimed pension since the date above given for the following reasons. My Pension was only $2.00 per month. I was moving about the country considerably. & when my six months pension became due. I used to go to a lawyer who charged me nearly as much as the claim came to, telling me he was entitled to pay for his services &c. I did not know any better, so the lawyer kept the oyster and gave me the shell. I have since learned that I need have been to no expense in obtaining my pension when it is due. & I therefore respectfully

DEPARTMENT OF THE INTERIOR JUN 19 1880 PENSION OFFICE

ask to be restored: that I was pensioned on account of chronic diarrhoea contracted while in the service of the United States & in the line of duty. I have been greatly afflicted with said disease from the time of my discharge up to and including the present time: that I hereby appoint Geo. Hunnue of the City of Joliet in the State of Illinois, my true and lawful attorney to prosecute this claim that my residence is Joliet Illinois and that my Post-Office address is Joliet Will County. Illinois

Witness
7

Henry H. Peipenbrink
Horace Meeks

Joseph L. Richardson (L.S.)

Also personally appeared Henry 7 Peipenbrink residing at Joliet, Will Co. Ills. and Horace Meeks residing at Joliet Will Co. Ills persons whom I certify to be respectable and entitled to credit, and who being by me duly sworn say they were present and saw Joseph L. Richardson the claimant sign his name to the foregoing declaration that they have every reason to believe from the appearance said claimant & their acquaintance with him that he is the identical person he represents himself to be & that they have no interest

direct or indirect in the prosecution of this claim

Henry H. Riepenbrink L.S.

Horace Weeks L.S.

Sworn to & subscribed before me this 16th day of June A.D. 1880 & I hereby certify that the contents of the above declaration &c were fully made known and explained to the applicant and witnesses before signing, including all interlineations and erasures & that I have no interest direct or indirect in the prosecution of this claim.

William H. Farley

Clerk of the County Court of said County &c

No. 70630

James Richardson

Late Pt. Co. 13th

N.Y.V.I.

Regt. Mich. Cavalry.

DEPARTMENT OF THE INTERIOR
PENSION OFFICE

Application for Restoration to Pension Rolls.

Filed By

Geo. H. Munroe

atty

Joliet

Will Co Illinois

State of Illinois County of Will ss

On this first day of October A. D, 1888 personally came before me the Clerk of the County Court of said County being a Court of Record Joseph L. Richardson who being duly sworn according to law makes the following declaration in order to obtain the benefits of the provisions of the Acts of Congress for increase of pensions - that he was a Private of Co "D" of 13th Reg't Mich. Vol's in war 1861-5 - that he holds pension Certificate No 16,630 and bearing date Nov. 13. 1880 - that the disability for which it was granted Continues and has increased very much Since said date and he applies for an increase of the rate of said Certificate and appoints Royal E Barber of Joliet Ill. his Attorney to prosecute the above claim and that his residence and P.O. Address is No 610 Clinton St. Joliet Will Co. Ill.

Joseph L. Richardson

Also personally appeared A. H. Laing residing at No 407 Clinton St. City of Joliet Will Co. Ill. and John C. Laing residing at No 400 Mississippi St. City of Joliet Will Co. Ill. persons whom declare to be respectable and entitled to credit and who being by me duly sworn Say that they were present and saw Joseph L. Richardson the claimant Sign his name to the foregoing declaration that they have every to believe from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be and

that they have no interest in the prosecution of this claim

A. V. Laing

John C. Laing

Sworn to and subscribed before me this 1st day of October 1888 and I hereby certify that the contents of the above declaration &c was fully made known & explained to the applicant and witness bfor swearing and that I have no interest direct or indirect in the prosecution of this claim

Henry N. Stassen

Clerk of Co. Court

PENSION OFFICE
OCT - 5 1888

Appd Pens
Septr 11/63
W.

16,630

WAR OF 1861.

ACT JULY 14, 1862.

Brief in case of Joseph L Richardson Priv

of Company D, 13th Regiment Mich Vols

POST OFFICE ADDRESS OF APPLICANT:

Hazelton. Shiawassee Co Michigan

Enlisted Nov. 9th 1861, Discharged Dec. 4th 1862

CLAIM FOR AN INVALID PENSION.

Declaration and Identification in due Form.

PROOF EXHIBITED.

Disch'd on surg- cert- of dis- for disch'y for "Chronic Diarrhoea"

The Capt of his Co certifies that applt while in the line of his duty and service of the U.S. at Nashville Tenn. on or about the 28th of March 1862 was taken sick with "Typhoid Fever" & "Chronic Diarrhoea"

Dr D.F. Alsdorf certifies that applt is 1/4 disabled by reason of "Chronic Diarrhoea."

"Disability — Temporary"

Semi Annual examination required.

Admitted Sept 9th, 1863, to a pension of $ 2 per month, commencing

Dec 4th, 1862

Disability one fourth. Disabled by Chronic Diarrhoea

Wm R Walker
EXAMINING CLERK.

Name and Residence of Agent.

H R Lovell
Flint
Mich

State of Illinois }
Will County } ss. George Munroe of said County being duly sworn on oath says that he has been intimately acquainted with one Joseph S. Richardson, referred to in Invalid Claim No. 16.630. for the part-fifteen, (15) years: that during all of said time the said Richardson has been suffering from Chronic Diarrhea. and has been unable to peiform manual labor by reason thereof: that affiant is acquainted with the pecuniary circumstances of said Richardson. and knows that he.(Richardson) has been unable to procure the services of a physician. by reason of his being unable to pay for the same. that during the part-five or six years affiant knows that said Richardson has been treated by one Doctor M. B. Campbell of Joliet. Illinois. at present: said Richardson is completely prostrated by reason of said disease, and in the opinion of this affiant will never be. better. I know the above. facts. from. personal. knowledge, my Post-Office addres is Joliet Illinois, and I have no interest direct or indirect. in the prosecution of this claim

George Munroe

Subscribed & sworn to. before me this 28 th. day of August. A.D. 1880. & I further certify that the affiant is a reputable person entitled to full faith and credit; and I have no interest direct or indirect in the prosecution of this claim

William B. Carey
County Clerk

No. 16.630

Joseph L. Richardson

Late Pvt Co. B. 13th Regt

Michigan Vol. Infy

Appl for

Geo. Munroe

Briefed

Filed By

Geo. Munroe.

Atty

Joliet

Illinois

Witness

U.S. PENSION
SEP 7 1880
OFFICE

U.S. PENSION
SEP = 7 1880
OFFICE

Mr. A. R. Lovell

Dear Sir

your
favor of Feb 21 is at Hand.
I have not Received notice of
the discharge of J. L. Richardson
from the authoraties that
discharged him and consequently
cannot certify to it neither can
I certify to his disabilities farther
than it Existed at the time I
last saw him. It would afford
me pleasure to do any thing in
my power for mr Richardson
and shall be ready at any time
to do so for I believe him fully
entitled to Pension. I will fill
this blank so far as I can if it is
of any use. Col. Smith can
send the notice of his discharg
or who ever discharged him

then I could make it more
compleat but if you get Col
Smith certificate and some
surgeon it may answer you

I have no means of knowing that
he still has Chronic Diorah his
family physician can certify to
that

With much Respect
I am Sir your Most
Obedient Servant
Loren Chadwick
capt. comp. D. 13th Regt. Mr. V.

No. 14872 16631

ACT OF JULY 14, 1862.

WAR OF 1861.

Vol. 3, page .....

Joseph L. Richardson
Hazelton
Shiawassee co. Mich.
Private Co D. 13th mich Vols.
Discharged Dec 4th, 1862.

Admitted Sept 9th 1863
at D. C. for Inv Dec 4th 1862
W Walker. Ep

Received mar. 24th, 1863,
H. R. Lovell
Flint
Mich
Attorney.

Admt-3

Mathews

Appd refd to Dr Alsdorf

for Ex. May 28th 1863.

Printed and for Sale by Tribune Company, 51 Clark Street, Chicago, where BLANKS of all kinds are constantly kept on hand.

Officer's Certificate to Disability of Soldier.

State of Tennasee
~~County~~ City of Murfreesboro

I, Capt. Loren Chadwick do hereby certify that I am Captain of Company D, of the 13th Regiment of Mich Infantry Volunteers, and am acquainted with Joseph L. Richardson who was a member of my Company, and as I am informed is an applicant for an Invalid Pension. That the said Joseph L. Richardson was mustered into service on or about the Ninth day of November 1861, ~~and discharged for disability about the Fourth day of December 1862~~, having become disabled from doing duty as a soldier from on or about the 28th day of March 1862, while in the service of the United States and in the line of his duty as a soldier, in the manner and at the place as follows: At Nashville Tennessee he was Taken sick and sent into hospital where he had Typhoid Fever and Chronic Diarrhea which so undermined his constitution as to make him incapable of service as a soldier

That the said soldier was in good health at the time he entered the service, and the disability above referred to affected him while in the service and at his discharge, as follows: He became greatly debilitated so as to be unable to perform manual labor, ~~and still had Chronic Diarrhea.~~

Loren Chadwick capt
comp D 13th Regt Mich vol Inf

Sworn to before me, and subscribed in my presence by Caperain Loren Chadwick this Eleventh day of March A. D. 186 3 and I certify that said Caperain Loren Chadwick is personally known to me to be the person he represents himself to be.

D. A. Allen
Maj Comdg 13th Mich Vols

DEPARTMENT OF THE INTERIOR
Mar 24 1
PENSION

OFFICER'S CERTIFICATE

TO

DISABILITY OF SOLDIER.

Act of July 14 A.D. 1862

Joseph L. Richardson

Co. "D", 13th Regt.

Mich. Infantry Vols.

Printed by Tribune Co., where BLANKS of all kinds may be had.

No. 16.630

Oct 10" 77. Blanks to claimant.

Michigan

Joseph S. Richardson

Rank Private

Company "D"

Regiment 13th Mich Vol

Detroit Agency.

Rate per month, $ 2.00

Commencing 4th December 1862

Certificate dated September 12th 1863

and sent to: W. R. Sovell

Flint

Mich

Act of 14 July, 1862.

Book H Vol 10 Page 243

E D Collier Clerk.

Chronic Diarrhoea

Scott

(3–230.)

INVALID. (Series L36. L255) Cert. No. 16,690

Name, Joseph L. Richardson

Rank, Pvt; Service, Co D 13 Mich Vols

Agency. Original Roll: Detroit

Transf'd ....., 18....., to .....

" ....., 18....., to .....

2d Issue. Class Peninsular Entered 41

Issued Nov 23, 1880

Mailed Nov 29, 1880

Rate and Period, $ 2 ., from March 4, 186

and $.6 " Nov 14 18[illegible]

Deductions: pays Since

Disability: Chr Diarrhoea

$2. Sanck.

3 Issue. Class Sec 4 Act June 27 1890

Entered

Issued Mc; July 13", 1889

Mailed " 18" 1889

Rate and Period, $ 10, from May 1", 1889

Deductions:

Disability: Chronic diarrhoea 2/3 Resulting disease of system

1st Issue. Class

Entered

Issued, ..., 18

Mailed ....., 18

Rate and Period, $....., from ....., 18

Deductions: .....

Disability: .....

1st Issue. Class

Entered

Issued, ..., 18

Mailed ....., 18

Rate and Period, $....., from ....., 18

Deductions: .....

Disability: .....

INDORSEMENTS.

'90 Nov 13 Disch Cert to pension Request filed - A.L.W.

(3–230.)

INVALID. (*Series* ____)

Cert. No. 16,63[illegible]

Name, Joseph L. Richardson

Rank, Private; Service, Co. D. 13 Mich.

Agency. { *Original Roll:* Detroit.
Transf'd ____, 18____, to ____
" ____, 18____, to ____

Issue. Class Increase. Act 1890.
Entered L 2,955

Issued October 5
Mailed " 16
Rate and Period, $ 12, *from* May 2[illegible]
Deductions: ____
Disability: Chr. diarrhoea, and dis. of rectum.

Issue. Class ____
Entered

Issued ____ 18
Mailed ____ 18
Rate and Period, $ ____, *from* ____, 18
Deductions: ____
Disability: ____

Issue. Class
Entered

Issued, ____, 18
Mailed ____, 18
Rate and Period, $ ____, *from* ____, 18
Wid. Cert. 696
Jan 5 – 97
Deductions: ____
Disability: ____

Issue. Class
Entered

Issued ____, 18
Mailed ____, 18
Rate and Period, $ ____, *from* ____, 18
Deductions: ____
Disability: ____

INDORSEMENTS.

(Order 68–90M.)

Ill Infantry

~~Holcomb~~ Ex'r.

[3—218 a.]

No. 644696

2/130 Act of June 27, 1890.

Sarah E. Richardson
#610. Clinton St. Joliet, Ill.
wid
Joseph L. Richardson
D. 13. Mich Inf.

Died at

Nov. 30. 1896.

No other claim. than

In. Ctf. 16.630

Detroit Agency
Dec 22, 1896 Buckley
Clerk.

Numerical No. ABANDONED.

Application filed: Dec. 7, 1896.

Attorney: Francis A. Hoover

P. O. Joliet

Ills

M 766.

(9378—14,000.)

Dec 28/96 d & c

Dec'd

Affidavits in support of claim.

~~Medical history~~

Add Hoover for evidence

date of soldier death

proof of marriage.

Prov marriage of father

& marriage of divorce

date of births & surname of children

proof of mar.

assignment rec'd.

OHIO.

Prov of full service of soldier

MICH.

No.

I, Robert J. Morrison, hereby certify that I am the Township Assessor of Joliet Township, Will County, Illinois, which includes the City of Joliet.

That I have examined the assessment rolls of said Township to ascertain whether any property has been assessed in the name of Sarah E Richardson or her late husband, Jseph L Richardson, with the following result:

West 24ft of East 48ft of North 100ft of Lot 49 Block 25 of N he Elmwoods Subdiv of sec 10 Township of Joliet - will county Illinois which is the only property owned by Joseph L Richardson Real or personal at the time of his death the family is very poor

T he ~~exxxxx~~ above, except typewritten part, was written by me without any other aid than access to said assessment rools, and I further certify that I have no interest, whatever, in the pension claim of said Sarah E Richardson.

Robert J. Morrison assessor

SWORN TO AND SUBSCRIBED before me this 1st day of April 1897, and I hereby certify that said Robert J Morrison is the present assessor of said township and personally known to me to be a credible person, and that I have no interest whatever in the pension claim of said Sarah E Richardson.

Samuel J Drew
Notary Public.

W 24ft of E 48 of N 100ft of Lot 49

on claim at annual $140.

PENSION OFFICE RECEIVED NOV 19 1897 U. S.

Act June 27, 1890

Widow's No. 644696

Joseph L Richardson

Co D 10th Mich Inf.

Sarah R Richardson

widow.

Although re-
peatedly notified
Claimant has
thus far neglected
to furnish evidence.
I furnish this
evidence of Depen-
dency, and will
forward other
requirements as
soon as Claimant
sends testimony to
my office.

Friendly

Francis A Stowers

Judge.

Ill

(3–145)

16630 Detroit

INVALID PENSION.

Claimant, Joseph L. Richardson

P.O., 610 Clinton Str. Joliet
~~County,~~
State, Ill.

Rank, Pri.
Company, D
Regiment, 13 Mich Vol Inf

Rate, $ 12. per month, commencing May 27, 1891

of rectum.

Disabled by ch diarrhoea & resulting disease

RECOGNIZED ATTORNEY:

Name, R. E. Barbour
P.O., Joliet Ill

Fee $ 10, Agent to pay.
Articles filed , 18 .

APPROVALS:

Submitted for JUL 20 1891, 18 .

Approved for Chronic diarrhoea and resulting disease of rectum.
Allegs resulting disease of heart, same refund to Med. Referee
July 31, 189, Lacrombe Legal Reviewer.

Markwood, Examiner.

Approved for Chronic diarrhoea & resulting disease of rectum
12 / 18 from May 27, 1891 –
Disease of heart not a ground.
W. A. Bell
Surgeon, 18 , Thos. D. Ingram, Medical Referee.
Sept. 11/91

Discharged Dec 4, 1862. Last paid to , at $ 10
Pensioned from " ", 18 ", at $ 2, for ch diarrhoea

Original declaration filed Mar 24, 1863; alleged Typhoid fever & resulting ch diarrhoea.
Unclaimed & dropped.
Rest at $2 fr Mar 4/67 & due to $6 fr Nov 14/77. Due to $10 fr May 1/89

Arrears allowed from , 18 , to , 18 , at $

PRESENT CLAIM.

Declaration filed Oct 20, 1890. Orig. & resulting disease of heart

6–221

3905 b–50 m

16,630
Detroit

(3—145)

Increase

INVALID PENSION.

Claimant, Joseph L. Richardson

P.O., ~~P.O.,~~ #610 Clinton St
~~County,~~
State, Joliet, Ills

Rank, Private
Company, D
Regiment, 13th Mich Vol Inft

Rate, $ 10. per month, commencing May 1. 1889.

Disabled by Chronic diarrhoea Gradually worse, deserves

RECOGNIZED ATTORNEY:

Name, Royal E. Barber
P.O., Joliet, Ills

Fee $ 10, Agent ____ to pay.
Articles filed ____, 18 .

APPROVALS:

Submitted ~~for~~ June 20, 18 89 Bangs, Examiner.

Approved for Chronic diarrhoea.

July 8, 1889 R Ednedun, Legal Reviewer.

Approved for
Chronic diarrhoea Gun
Resulting disease of Liver
10/8 from Injury 8 1889
75 Yrs of age (M.C.
Stephen M. Dix
July 8 1889 Chas. McMillen, Medical Referee.

Discharged Dec 4, 18 62. Last paid to ____, at $ 6

Pensioned from Dec. 4, 18 62, at $ 2, for Chronic diarrhoea

Original declaration filed Mch 24, 18 63; alleged Typhoid fever and resulting Chronic diarrhoea Unclaimed. Dropped Rest. at $2 from March 4—'67 and inc. to $6 from Nov 14—'77

Arrears allowed from ____, 18 , to ____, 18 , at $ ____

PRESENT CLAIM.

Declaration filed Oct 5, 18 88 Claims — Inc. in the disability

Miles

(15299—50,000.) 6—221

Work

[3—126.]
ELECTRO'S

3

1

Restoration. INVALID PENSION. Increase

Claimant, Joseph L. Richardson

P. O., Joliet | Rank, Private

County, Will | Company, "D"

State, Illinois | Regiment, 13. Mich Vols:

Attorney, Geo: J. Monroe. Joliet. Illinois. Fee, $ 10.00 agt at 10 ay.

Rate, $ 2 per month, commencing March 4. 1867

$8 6 " " November 14. 1877.

Disabled by Chronic Diarrhoea

Submitted Oct 25, 1880, by A. S. McCandless, Examiner.

Approved for Chronic diarrhoea. Approved for Chr. diarrhoea 1/4 to Nov. 14-77 & 3/4 after.

D. A. Lyon

Nov. 18, 1880, Reviewer. Nov. 19, 1877, Thos Sanders Med. Referee

Discharged Dec 4, 1862. | Certificate surrendered Yes, 18

Original application filed March 24, 1863. | Last paid at $ 2.00, to March 4, 1867.

Restoration
~~Increase~~ applications filed Oct 18 1877. June 9, 1880. | Inclaims 3 1/4 yrs. on P. A Rejet.

Pensioned Sept 9, 1863; from Dec 4, 1862; at $ 2.00 per month for Chronic Diarrhoea. —

No subsequent service. Failed to claim since Mar 4/67 owing to expense &c. Muting, lawyer taking nearly all for fees—

Claims Same

In the matter of the pension of Joseph L Richardson
late Priv. Co. "D" 13th Regt Mich. Inf. Vols.

State of Illinois Will County ss

On this 17th day of October A.D. 1890 personally appeared before me the clerk of the County Court in & for said County in said State being a Court of record. Joseph L. Richardson who being duly sworn according to law, makes the following declaration in order to obtain the benefit of the provisions of Acts of Congress relating to pensions. that he was Private in Co. "D" 13th Regt Mich. Inf. Vols. and a pension was granted him by reason of the disability of Chronic Diarrhoea by Cert. No 16630 - that the rate was increased from May 1. 1889 to $10.00 per month - that the degree of his disability from that cause has increased since the date of his last Certificate - that in addition to that disability he suffers by reason of a great Soreness and pain in the Stomach which he believes results from the chronic diarrhoea - that he is also troubled with pain in the region of the heart and a manifest disease of that organ resulting as he believes from the same cause wherefore he asks for a further increase of pension as he is utterly disabled from all physical labor or pen work - that he appoints Royal E Barber of Joliet Illinois his attorney to prosecute the above claim

His residence and post-office address is at No 610 Clinton St. Joliet City, County of Will and State of Illinois

Inpresence of
John C. Lang
Johann Dockendorf Deutsch

} Joseph, L, Richardson

Also personally appeared
John C. Lang residing at # 400 Mississippi St. Joliet. Ills.
and John Dockendorf residing at # 621 Clinton St. Joliet Ills.
persons whom I certify to be respectable and entitled to credit and who being by me duly sworn say that they were present and saw Joseph L. Richardson the claimant, sign his name to the foregoing declaration, that they have every reason to believe from the appearance of said claimant and their acquaintance with him that he is the identical person he represents himself to be and that they have no interest in the prosecution of this claim.

John C. Lang

Johann Dockendorf Deutsch

Sworn to and subscribed before me this 17th day of October A.D. 1890 and certify hereby that the contents of the above declaration we were fully made known and explained to the applicant witnesses before swearing and that I have no interest direct or indirect, in the prosecution of this claim

Henry H. Slattery
Clerk of Co. Court

PENSIONS
OFFICE.
OCT
20
1880

State of Illinois
Will County } ss Nathan Cook of said County being duly
sworn says that he has been intimately acquainted with
one Joseph L. Richardson referred to in Invalid claim No. 16,630
for the past seventeen (17) years. That during all of said time
the said Richardson has been continually suffering from chronic
diarrhoea and has been unable to perform any hard
manual labor by reason thereof: that affiant has employ-
ed a physician during a part of said time, but that
during a greater portion of said time he said Richardson
has been too poor to employ a physician. To the
personal knowledge of this affiant one Dr. M. B.
Campbell of Joliet Illinois has treated said Richard-
son for the past five or six years. At the present time
said Richardson is utterly unable to perform any man-
ual labor by reason of said disease, and in my
opinion he will grow worse instead of better. My
Post-Office address is Joliet Illinois and I have no
interest in the prosecution of this claim

Nathan Cook

Subscribed & sworn to before me this 8th day of
September A.D. 1880 and I have no interest in the prosecu-
tion of this claim.

W. H. Barley
Clerk County Court Will Co. Ill.

No 16. 630

Joseph L. Richardson

Late Pl. Co D. 18th Regt

Michigan Vol Infty

- Affdvt -

Nathan Cook

Brief.

Filed By

Wm. Hunnewell.

Atty

Joliet

Illinois

Will Co

Printed and for sale at the Tribune Office, 51 Clark St., Chicago, where Blanks of all descriptions are kept constantly on hand.

SURGEON'S CERTIFICATE OF DISABILITY.

State of Michigan
Genesee County, } ss.

It is hereby certified that Joseph L. Richardson late a Private in Captain Loren Chadwicks Co. D, of the 13th Regiment of Mich Infantry Volunteers is rendered incapable of performing the duty of a soldier by reason of wounds or other injuries inflicted while he was actually in the service aforesaid, and in the line of his duty as follows:

By satisfactory evidence and accurate examination, it appears that on or about the 28th day of March 1862, being ~~engaged~~ at a place called Nashville in the State of Tennessee he was disabled in the manner following, viz:(1) He was attacked with Typhoid fever, and on account of said illness was sent into hospital at Nashville aforesaid, and has never since been able to do duty as a soldier, his fever leaving him affected with Chronic Diarrhea, which he still has, and his system is generally debilitated.

That in consequence thereof he is now disabled, and the following is an accurate description of his disease and the manner in which it now affects him, and in what manner his present condition and disability are connected therewith, viz:(2)

With a Chronic Diarrhoea & also with a general debility

They further state that they believe his habits of life to be good, and not of a character to have produced or increased his present disease.

That he is in consequence of said disease not only incapacited for military duty, but, in the opinion of the undersigned, is(3) Totally disabled from obtaining his subsistence from manual labor.

Dated the Nineteenth day of ~~February~~ March 1863

Wm S Cornelius M.D
M. M. Smith M.D.

I CERTIFY that the foregoing certificate was subscribed by William S Cornelius and M M Smith on the Nineteenth day of March 1863 before me, the undersigned, a Notary Public in and for said County; and each being duly sworn, says that the contents of the same are true, and I further certify that the affiants are physicians well known to me, and that they are reputable in their profession. And I further certify that I am not interested in this claim or concerned in its prosecution.

Dated the Nineteenth day of March 1863

Henry Seymour
Notary Public
Genesee Co
Mich

STATE OF Michigan }
County of Genesee } ss.

I George R Gould Clerk of the County Court in and for the County and State above named, do hereby certify that Henry Seymour Esq., before whom the foregoing declaration and affidavits were made, and who has thereunto signed his name, was, at the time of so doing, an acting Notary Public in and for the County and State above named, duly commissioned and sworn, that all his official acts, as such, are entitled to full faith and credit, and that his signature thereto is genuine.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of said Court, at Flint in said County, this 20th day of March A. D. 1863

Geo R Gould
Clerk.

SURGEON'S CERTIFICATE OF DISABILITY.

_____

_____ *Co.* _____ *Reg't,*

_____ *Vols.*

Declaration filed _____ 186

Printed and for sale by Tribune Company, 51 Clark St., Chicago.

NOTES.

1. The physicians will here give a full and minute description of the claimant's disease.
2. State here in what manner the applicant's present condition and disability are connected with the disease named, showing in what manner it has affected him so as to produce disability in the degree stated. If one of the witnesses was the claimant's attending physician before he entered the service, he should so state in this blank, and, if such was the case, that he was in no manner affected with his present disease before he entered the service.
3. This blank should be filled with the proportional *degree* of disability, whether "*totally*," "*three-fourths*," "*one-half*," "*one-third*," or as the case may be.

When made by an Army Surgeon, this certificate need not be sworn to.

Examining Surgeon's Certificate.

June 25th, 1863.

I hereby Certify, That I have carefully examined

Applicant's service. Joseph L. Richardson, late a Private in company (D) Thirteenth Reg. Mich. Vol. Inf.,

in the service of the United States, who was discharged at Nashville Tenn., on the 4th day of December, 1862, and is an applicant for an invalid pension, by reason of alleged disability resulting from Chronic Diarrhea

In my opinion the said Joseph L. Richardson

Degree of disability. is ~~One half (½)~~ One fourth (¼) incapacitated for obtaining his subsistence by manual labor from the cause above stated.

Origin. Judging from his present condition, and from the evidence before me, it is my belief that the said disability accrued in the service aforesaid in the line of duty.

Probable duration. The disability is not Permanent

A more particular description of the applicant's condition is subjoined:

Particular description. He has chronic Diarrhea. Some tenderness of spine in Lumber region & bowels quite sympathetic. Is slowing improving & will probably Recover in time if judicious

D. W. Alden

Examining Surgeon.

Commd Tennessee Co Mich

Joseph L. Richardson
Mich

☞ Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Increase Pension Claim No. 16630
[State above whether for original, increase, or restoration.]

Name and rank of claimant.

Joseph L Richardson, Rank, Pr

Company D, 13 Reg't Mich-Inf- Joliet- Ill State,

Claimant's post-office address. Joliet- Ill

[Post-office address of the Board.]

May 27, 1891.
[Date of examination.]

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred

Cause of disability.

in the service, viz: Chronic Diarrhea, rumbling disease of Rectum, and heart disease

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of Ten dollars per month.

He makes the following statement upon which he bases his claim for Increase
[Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible.

I have Chronic Diarrhea the most of the time and weakness in my bowels. I am hard of hearing.

Upon examination we find the following objective conditions: Pulse rate, 88;

Here give a full description of the disabilities, in accordance with pars. 5, 6, 51, 52, &c., of Book of Instructions for 1889

respiration, 21; temperature, 98-5; height, 5 feet 4 inches; weight, 135 pounds; age, 77 years. Applicant looks old feeble and stooped. Walks very slow and with uneven step. Tongue furred- skin and eyes sallow. nutrition poor. Stomach and bowels tympanitic and tender Colon gaseous. he has loss of expulsive power and at times involuntary evacuations. he has two ext. pile-tumors size of grapes. Rectal walls flabby and tending to prolapse. He hears conversation only in loud tones is dull of comprehension; does not hear watch with either ear. tympani both ears thickened and rough. Eust. tubes pervious otherwise ears look healthy. No evidence of organic disease of heart. there is a slight Aenemic Murmur. Action regular but weak. Venous circulation weak. superficial veins distended Lungs normal. The infirmities of age are well marked

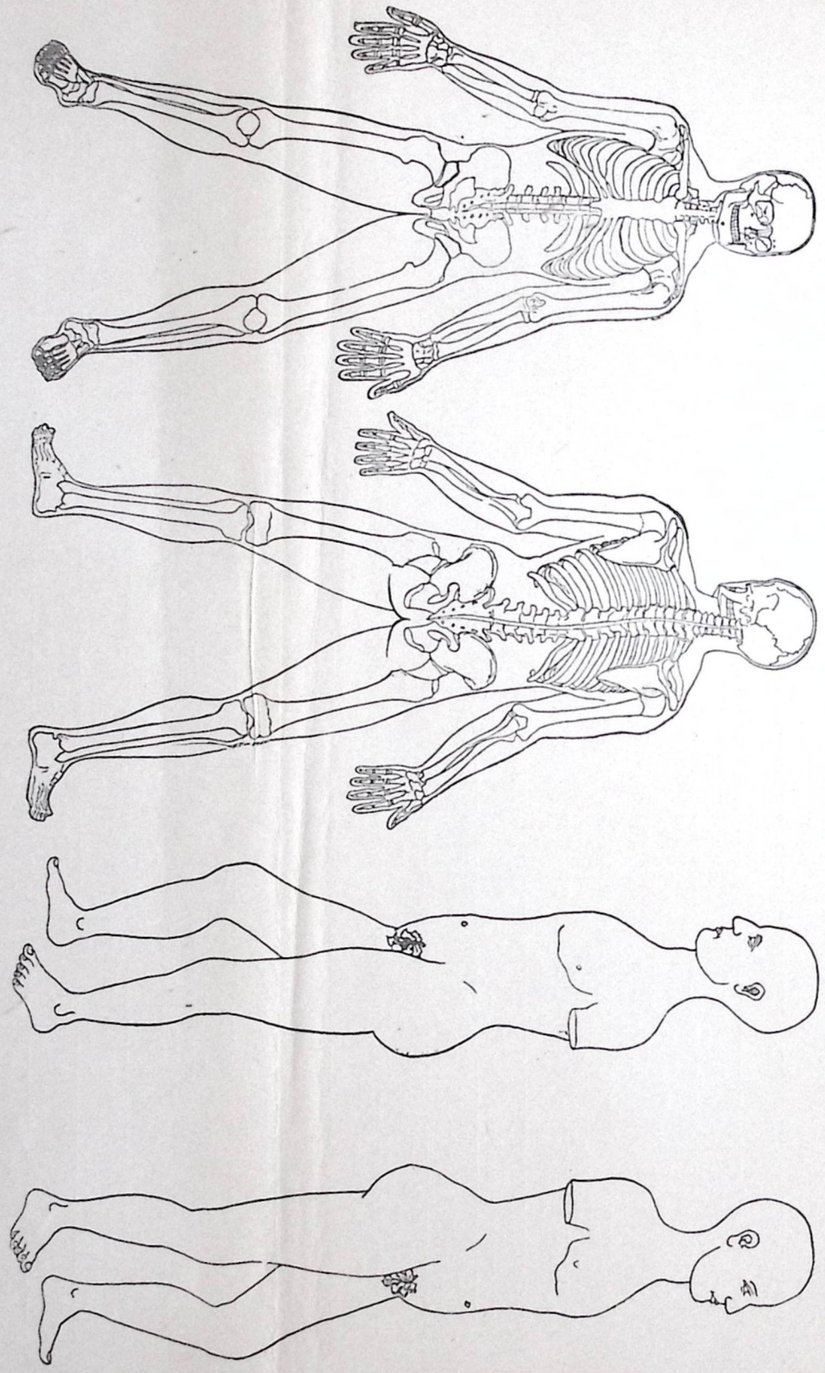
Rate for EACH cause of disability.

; He is, in our opinion, entitled to a 12/18 rating for the disability caused by Ch. Diarrhea rumbling disease ~~for that caused by~~ of Rectum, and 22/30 for that caused by severe deafness both ears.

William Dougall, Pres. A. Nash, Sec'y. G E Cowell, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

(3504—300,000.) 6—552



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. *Extract from Section 4, Act of Congress approved July 25, 1882.*

6—552

U. S. PENSION BUREAU JUN 4 1891 OFFICE.

SURGEON'S CERTIFICATE

IN CASE OF

Joseph L. Richardson

Co. D, 13 Reg't Mich. Inf

Applicant for Increase

No. 16630

DATE OF EXAMINATION:

May 27th, 1891.

William Dougall, *Pres.*,
Alfred Nash, *Sec'y*,
G E Cowell, *Treas.*,
} BOARD.

Post office, Joliet

County, Will.

State, Ill.

P. S.—Write your Post-office address plainly and in full.

Continue record of examination here.